

Complete Summary

TITLE

Pregnancy and related conditions: proportion of patients with vaginal birth after cesarean section.

SOURCE(S)

Specifications manual for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 July. Pregnancy and related conditions core performance measures. p. PR-1 to PR-3-5.

Brief Abstract

DESCRIPTION

This measure assesses prenatal patient evaluation, management, and treatment selection concerning vaginal deliveries in patients who have a history of previous cesarean section.

RATIONALE

A trial of labor may be offered to women who have had a previous cesarean section. Although trial of labor is usually successful and is relatively safe, major maternal complications can occur. The rate of vaginal birth after cesarean section (VBAC) along with other performance measures such as primary cesarean section, repeat cesarean section, and neonatal complications will assist organizations in understanding whether an increase or a decrease in the rate of VBAC is desirable.

PRIMARY CLINICAL COMPONENT

Pregnancy and related conditions; vaginal birth after cesarean section

DENOMINATOR DESCRIPTION

All patients who delivered with a history of previous cesarean section (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Patients with vaginal birth after cesarean section (VBAC)

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Process

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Wide variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

American College of Obstetricians and Gynecologists, Task Force on Cesarean Delivery Rates. Evaluation of cesarean delivery. Washington (DC): American College of Obstetricians and Gynecologists; 2000. 63 p.

Menacker F, Curtin SC. Trends in cesarean birth and vaginal birth after previous cesarean, 1991-99. Natl Vital Stat Rep 2001 Dec 27;49(13):1-16. [PubMed](#)

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

All age groups

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

The rate of vaginal birth after previous cesarean delivery (VBAC) increased by 33% from 1991 to 1996, to 28.3 per 100 births to women with a previous cesarean, and then declined by 17% from 1996 to 1999, down to 23.4. In 1999 a total of 97,680 births were delivered by VBAC. For every year of the period 1991-99, VBAC rates were highest for teenagers and declined with increasing maternal age.

EVIDENCE FOR INCIDENCE/PREVALENCE

Menacker F, Curtin SC. Trends in cesarean birth and vaginal birth after previous cesarean, 1991-99. Natl Vital Stat Rep 2001 Dec 27;49(13):1-16. [PubMed](#)

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Maternal complications of vaginal birth after cesarean (VBAC) include uterine rupture, hemorrhage requiring transfusion or hysterectomy, and infection. Neonatal complications include birth trauma, and those related to prolonged hypoxia (e.g., birth asphyxia and death).

EVIDENCE FOR BURDEN OF ILLNESS

Gregory KD, Korst LM, Cane P, Platt LD, Kahn K. Vaginal birth after cesarean and uterine rupture rates in California. Obstet Gynecol 1999 Dec; 94(6):985-9. [PubMed](#)

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients who delivered with a history of previous cesarean section

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR (INDEX) EVENT

Clinical Condition
Institutionalization
Therapeutic Intervention

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Principal Diagnosis Code or ICD-9-CM Other Diagnosis Codes for pregnancy with delivery as defined in Appendix A (ICD-9-CM Code Tables), Tables 4.01, 4.02, 4.03, and 4.04 of the original measure documentation

AND

ICD-9-CM Principal Diagnosis Code or ICD-9-CM Other Diagnosis Code 654.21
(previous cesarean section)

Exclusions

ICD-9-CM Principal Diagnosis Code or ICD-9-CM Other Diagnosis Code for
abortion as defined in Appendix A, Table 4.06 of the original measure
documentation

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patients with vaginal birth after cesarean section (VBAC)

Exclusions

International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-
9-CM) Principal Procedure Code for cesarean section as defined in Appendix A,
Table 4.07 of the original measure documentation

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Unspecified

ALLOWANCE FOR PATIENT FACTORS

Risk adjustment devised specifically for this measure/condition

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

This measure is adjusted for risk factors.

STANDARD OF COMPARISON

External comparison at a point in time

External comparison of time trends

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Pregnancy and Related Conditions Core Measure Set has been field tested in conjunction with the National Perinatal Information Center (NPIC) using its trend database to analyze the measures. This testing permitted refinement respecting the measures and provided information pertinent to risk-adjustment models.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Overview of the pregnancy and related conditions (PR) core measure set. [internet]. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 Mar 22 [cited 2002 Nov 13]. [3 p].

Identifying Information

ORIGINAL TITLE

VBAC.

MEASURE COLLECTION

[Joint Commission on Accreditation of Healthcare Organizations \(JCAHO\) Core Performance Measures](#)

MEASURE SET NAME

[Pregnancy and Related Conditions Core Performance Measures](#)

DEVELOPER

Joint Commission on Accreditation of Healthcare Organizations

ENDORSER

National Quality Forum

ADAPTATION

Measure was adapted from another source.

PARENT MEASURE

Patients with vaginal birth after cesarean section (VBAC) (The MEDSTAT Group, Inc)

Deliveries with a previous history of cesarean section (Arkansas Foundation for Medical Care, Inc)

RELEASE DATE

2001 Apr

REVISION DATE

2002 Jul

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Specifications manual for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 July. Pregnancy and related conditions core performance measures. p. PR-1 to PR-3-5.

MEASURE AVAILABILITY

The individual measure "VBAC," is published in "Specifications Manual for National Implementation Hospital of Core Measures." Information is available from the [Joint Commission on Accreditation of Healthcare Organizations \(JCAHO\) Web site](http://www.jcaho.org). For further information refer to www.jcaho.org.

COMPANION DOCUMENTS

The following are available:

- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Overview of the pregnancy and related conditions (PR) core measure set. [internet]. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 Mar 22 [cited 2002 Nov 13]. [3 p].

This document is available from the [Joint Commission on Accreditation of Healthcare Organizations \(JCAHO\) Web site](#).

- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). A comprehensive review of development and testing for national implementation of hospital core measures. [internet]. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 [cited 2002 Nov 13]. [8 p]. This document is available from the [JCAHO Web site](#).
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Attributes of core performance measures and associated evaluation criteria. [internet]. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 [cited 2002 Nov 13]. [4 p]. This document is available from the [JCAHO Web site](#).
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Information on final specifications for national implementation of hospital core measures as of 11/04/02. [internet]. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2002 Nov 04 [cited 2002 Nov 13]. [10 p]. This document is available from the [JCAHO Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI on December 27, 2002. The information was verified by the Joint Commission on Accreditation of Healthcare Organizations on January 17, 2003.

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